

CLAIMS ONLY							Application Number <b>10/067359</b>		Filing Date			
							Applicant(s)					
8-6-04							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1			/	/			51					
2				/			52					
3				/			53					
4				/			54					
5				/			55					
6				/			56					
7				/			57					
8				/			58					
9				/			59					
10				/			60					
11				/			61					
12				/			62					
13			/	/			63					
14			/	/			64					
15			/	/			65					
16			/	/			66					
17			/	/			67					
18			/	/			68					
19			/	/			69					
20			/	/			70					
21			/	/			71					
22			/	/			72					
23			/	/			73					
24			/	/			74					
25			/	/			75					
26			/	/			76					
27			/	/			77					
28			/	/			78					
29			/	/			79					
30			/	/			80					
31			/	/			81					
32			/	/			82					
33			/	/			83					
34			/	/			84					
35			/	/			85					
36			/	/			86					
37			/	/			87					
38			/	/			88					
39			/	/			89					
40			/	/			90					
41			/	/			91					
42			/	/			92					
43			/	/			93					
44			/	/			94					
45			/	/			95					
46			/	/			96					
47			/	/			97					
48			/	/			98					
49			/	/			99					
50			/	/			100					
Total Indep			5				Total Indep					
Total Depend			21				Total Depend					
Total Claims			26				Total Claims					